



## ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         |          |        |          |
| O.I.P.E. CLASSIFIER       |          | 19     | 5/15/01  |
| FORMALITY REVIEW          | hr       | 852    | 04-09-01 |
| RESPONSE FORMALITY REVIEW | S.G.     | 1077   | 6/29/01  |

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
" ..... Allowed I ..... Interference  
- (Through numeral)... Canceled A ..... Appeal  
+ ..... Restricted O ..... Objected

| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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